

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID. NO.	DATE
FEE DETERMINATION	M G		8/16/00
O.I.P.E. CLASSIFIER		1/3	8/18/00
FORMALITY REVIEW	RD	61780	9-23-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	9/16/00
2	✓	✓	10/13/00
3	✓	✓	3/26/01
4	✓	✓	2/16/03
5	✓	✓	6/19/06
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
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49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	10/19/01
52	✓	✓	3/26/02
53	✓	✓	3/16/02
54	✓	✓	8/22/06
55	✓	✓	
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Claim	Final	Original	Date
101	✓	✓	
102	✓	✓	
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106	✓	✓	
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141	✓	✓	
142	✓	✓	
143	✓	✓	
144	✓	✓	
145	✓	✓	
146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

If more than 150 claims or 10 actions
 staple additional sheet here

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(LEFT INSIDE)